A

Please type a plus sign (+) inside this box - +

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office U.S DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

uned to respond to a conec	uon oi inionnation uniess it displays a valid Olvib control numb					
Attorney Docket No.	tesa AG 1511-WCG					
First Inventor	Achim FRANCK					
Title	ADHESIVE SHEET STRIP					
Express Mail Label No	EV 014941328US					

		w -						
See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231						
1. <b>7</b> Fo	ee Transmittal Form (e.g., PTO/SB/17) Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
	pplicant claims small entity status. ee 37 CFR 1.27.	Nucleotide and/or Amino Acid Sequence Submission     (if applicable, all necessary)						
	pecification [Total Pages 11]  referred arrangement set forth below)	a. Computer Readable Form (CRF)						
-   - ( - ! -	Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention	<ul> <li>b. Specification Sequence Listing on: <ol> <li>CD-ROM or CD-R (2 copies); or</li> <li>paper</li> </ol> </li> <li>c. Statements verifying identity of above copies</li> </ul>						
	Brief Summary of the Invention	ACCOMPANYING APPLICATION PARTS /						
- 1	Brief Description of the Drawings (if filed) Detailed Description Claim(s)	9. Assignment Papers (cover sheet & document(s)) V						
	Abstract of the Disclosure	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney						
l. — _		11. English Translation Document (if applicable)						
	rawing(s) (35 U.S.C. 113) [Total Sheets ]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
5. Oath or Γ	[ , star : ages ]	13. Preliminary Amendment						
а.	Newly executed (original or copy)	Return Receipt Postcard (MPEP 503)						
ъ. Г	Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	(Should be specifically itemized)  Certified Copy of Priority Document(s)						
L		15. (if foreign priority is claimed)						
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR  Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
6 A	1 63(d)(2) and 1.33(b). pplication Data Sheet. See 37 CFR 1.76	17. Other: Appendix						
18. If a CO or in an Applic	ONTINUING APPLICATION, check appropriate box, and s ation Data Sheet under 37 CFR 1.76:	supply the requisite information below and in a preliminary amendment,						
c	ontinuation Divisional Continuation-in-par	rt (CIP) of prior application No.:/						
	application information: Examiner	Group / Art Unit						
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
	19. CORRESPON	NDENCE ADDRESS						
Customer Number or Bar Code Label  (Insert Customer Number of Bar Code Label)  (Insert Customer Number of Bar Code Label)								
Name	William C. Gerstenzang 273	386						
		DEMARK OFFICE						
Address	NORRIS MCLAUGHLIN & MARCUS, P.A.							
	220 East 42nd Street							
City	New York State	New York Zip Code 10017						
Country	United States Telephone	212-808-0700 Fax 212-808-0844						
Name (Pnnt/Type) William C. Gerstenzang Registration No. (Attorney/Agent) 27,552								
Signat	ure William A Tour	Date December 11, 2001						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

The first rate with the first that t

PTO/SB/17 (XX-XX)

Approved for use through 10/31/2002 OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

OMB 0651-0032

Under the Paperwork Reduction Act of 1995, no persons are required to r espond to a collection of information unless it displays a valid OMB control number.

## FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

\$780.00

Complete if Known						
Application Number	To Be Assigned					
Filing Date	Herewith					
First Named Inventor	Achim FRANCK					
Examiner Name	To Be Assigned					
Group Art Unit	To Be Assigned					
Attorney Docket No.	tesa AG 1511-WCG					

METHOD OF PAYMENT	FEE CALCULATION (continued)								
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES								
Deposit	Large E Fee	arge Entity Small Entity Fee Fee Fee Fee Foo Deposite in the second seco							
Account Number 14-12631	Code	(\$)	Code	(\$)	_	Descripti		Fee Paid	
Deposit	105	130	205		Surcharge - late	•			
Account Name	127	50	227	25	Surcharge - late sheet	e provisiona	Il filing fee or cover		
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	139	130	139		Non - English s				
=	147	2,520	147				arte reexamination		
Applicant claims small entity status. See 37 CFR § 1 27	112	920*	112	920*	Requesting put action	ner			
2. Payment Enclosed:	113	1,840*	113	1,840*	Requesting put	blication of S	SIR after Examiner		
Check Credit card Money Order Other	115	110	215	55	action Extension for re				
FEE CALCULATION	116	400	216		Extension for re				
1. BASIC FILING FEE	117	920	217						
Large Entity Small Entity	i	1,440	218						
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid		1,960	228						
101 740 201 370 Utility filing fee 740.00	119	320	219		Notice of Appea				
106 330 206 165 Design filing fee	120	320	220		Filing a brief in				
107 510 207 255 Plant filing fee	121	280	221		Request for ora				
108 740 208 370 Reissue filing fee	138	1,510			Petition to instit				
114 160 214 80 Provisional filing fee	140	110	240		Petition to reviv				
SUBTOTAL (1) \$740.00		1,280	241		Petition to reviv				
	1	1,280	242		Utility issue fee				
2. EXTRA CLAIM FEES Fee from	143	460	243		Design issue fe	` ,			
Extra Claims below Fee Paid	144	620	244		Plant issue fee				
Total Claims 10 -20** = 0 X 18.00 = 0.00 Independent 1 2** = 0 X	122	130	122		Petitions to the				
Claims	123	50	123						
Large Entity Small Entity	126	180	126		Processing fee under 37 CFR § 1 17(q)  Submission of Information Disclosure				
Fee Fee Fee Fee Description					Statement				
Code (\$) Code (\$)	581	40	581	40	Recording each (times number of	patent assign of properties	gnment per proper	ty 40.00	
100 04	146	740	246	370	Filing a submiss (37 CFR § 1.12				
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	149	740	249	370	For each addition	onal inventio	n to be examined		
109 84 209 42 ** Reissue independent claims	179	740	279		(37 CFR § 1.12 Request for Cor	29(b))			
over original patent	169	900	169						
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		169 900 169 900 Request for expedited examination of a design application  Other fee (specify)							
SUBTOTAL (2) \$0.00								L	
or number previously paid, if greater; For Reissues, see above	*Redu	uced by	/ Basic	Filing F	Fee Paid	SUBTO	ΓAL (3)	\$40.00	
SUBMITTED BY				33		Complete (r	f annirable)		
Name (Print/Type) William C. Gerstenzang		egistra httorney/	tion No. Agent)		27,552	Telephone	212-808	8-0700	
Signature Millianna Jewlina	~					Date	December 1	1, 2001	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## **EXPRESS MAIL CERTIFICATE**

"Express Mail" mailing label number <u>EV 015941328US</u> Date of Deposit December 11, 2001

I hereby certify that the following items:

- 1) Utility Patent Application Transmittal
- 2) Fee Transmittal Form (in duplicate)
- 3) Application consisting of
  - a) Specification (Pages 1-8)
  - b) Claims (Pages 9 & 10)
  - c) Abstract (Page 11)
- 4) Preliminary Amendment (annexing marked-up copies of the amended claims)
- 5) Combination Declaration and Power of Attorney
- 6) Transmittal of Priority Document
- 7) German Priority Document No.100 64 160.1
- 8) Recordation Form Cover Sheet (in duplicate) and Assignment
- 9) Appendix citing Title, List of Inventors, Claim to Priority, and Certificate of Mailing

are being deposited with the United States Postal Services "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231.

NORRIS, McLAUGHLIN & MARCUS, P.A.

By billiame Suoling